

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Marc O. Schurr
Application No.: 10/722,109
Filed: November 25, 2003
For: Medical Implant

Group No.: 3774
Examiner: Matthews, W

Mail Stop Issue Fee
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

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AND PAYMENT OF PUBLICATION FEE ((37 C.F.R. § 1.211(e))

1. Applicant hereby pays the issue fee for the attached Issue Fee Transmittal PTOL-85.
2. Enclosed please find an amendment.
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Application status is other than a small entity with a utility fee of \$1,510.00.

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This is an application for a utility patent and:

The publication fee of \$ 300.00 (§ 1.18(d)) is being paid herewith.

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Date: January 21, 2009

/Moses A. Heyward, Reg. #61,140/

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02757/00101 997846.1

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail** Mail Stop ISSUE FEE
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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

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2101 7590 10/20/2008

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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/722,109	11/25/2003	Marc O. Schurr	2757/101	4848

TITLE OF INVENTION: MEDICAL IMPLANT

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0	\$1810	01/20/2009

EXAMINER	ART UNIT	CLASS-SUBCLASS
MATTHEWS, WILLIAM H	3774	623-023640

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list
 (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

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Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☐ Corporation or other private group entity ☐ Government

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5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature /Moses A. Heyward, Reg. #61,140/

Date January 21, 2009

Typed or printed name Moses A. Heyward

Registration No. 61,140

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